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## \*BIBDATASHEET\*

CONFIRMATION NO. 4418

Bib Data Sheet

SERIAL NUMBER 09/815,336	FILING DATE 03/23/2001  RULE	CLASS 600	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 2784-25
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/191,764 03/24/2000

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/03/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MD	SHEETS DRAWING 14	TOTAL CLAIMS 35	INDEPENDENT CLAIMS 3
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Verified and Acknowledged  
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TITLE  
 METHODS FOR DIAGNOSTIC AND THERAPEUTIC INTERVENTIONS IN THE PERITONEAL CAVITY

FILING FEE RECEIVED 555	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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